BEST AVAILABLE COPY

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

09888271

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OF			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			42						FEE]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			42 minus 20=		• 9	22		X\$ 9=	198	OR	X\$18=	
INDEPENDENT CLAIMS				inus 3 =	• 0			X40=	, , , , , , , , , , , , , , , , , , ,	OR	X80=	
MULTIPLE DEPENDENT CLAIM P			RESENT					+135=		OR	+270=	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				TOTAL	53	OR	TOTAL		
	C		MENDED - PART II (Column 2) (Column 3)					SMALL ENTITY OR			OTHER THAN SMALL ENTITY	
		(Column 1) CLAIMS		HIGH				UNALL				
ENT A		REMAINING AFTER AMENDMENT			BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	. 42	Minus	4	2	=		X\$ 9=		OR	X\$18=	
AME	Independent	· 3	Minus	···/3		=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	CLAIM		,	+135=		OR	+270=	
							ı	TOTAL			TOTAL	
		(0.1		10 1		10-1	,	ADDIT. FEE		17,	ADDIT. FEE	
		(Column 1)			mn 2) IEST	(Column 3)		•				
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Š	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	* NTATION OF M	Minus	***	T CL A114			X40=		OR	X80=	
-	TINOI PHESE	INTALION OF M	OLIIPLE DE	PENDEN	CLAIM		'	+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
					_							
		(Column 1) CLAIMS		HIGH	mn 2) HEST	(Column 3)	r		4001		r	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=			X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							7,402		OR		
	If the entry in sele	mn 1 is less than t	he entry in col	ump 2 umit	o "O" in co	dumo 2		+135=		OR	+270= .	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		nber Previously Pa					r fou	and in the and	oropriate bo	x in co	ևտո 1	